

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | B S      |        | 09/04/01 |
| O.I.P.E. CLASSIFIER       |          | 1071   | 09/02    |
| FORMALITY REVIEW          |          |        | 10/09/01 |
| RESPONSE FORMALITY REVIEW |          |        |          |

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim | Date    |
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| 2     | 9/4/01  |
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If more than 150 claims or 10 actions  
staple additional sheet here

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10/29  
10/01/01